AP WORKING DRAFT

Patient:
D.O.B: 01/05/2004 (10 years)
Sex: Female
Date Obtained: 07/22/2014
Date Accessioned: 07/22/2014
Physician: Anjali MD

Accession #: 01- S-14-09176
Patient ID #: 1972
Account # 100322
SSN: 999-99-9999
Location: 5B Pediatrics
Service: PGI- Peds GI (PGI)
Client:
Medical System

Surgical Pathology Report

Clinical Information
10 year-old female with recurrent pancreatitis and pancreas ___. Iron deficiency anemia with no obvious GI causes. EGD - Visually normal. Colon - Erythema/swelling at ICD. TI - Normal visually.

___ trans___itis.

Final Diagnosis
A Duodenum, Biopsy:
- Duodenal mucosa with no specific pathologic abnormality.

B Stomach, Biopsy:
- Gastric mucosa with mild reactive changes.

C Esophagus, Distal, Biopsy:
- Squamous mucosa with no specific pathologic abnormality.

D Esophagus, Mid, Biopsy:
- Squamous mucosa with no specific pathologic abnormality.

E Ileo-Cecal, Biopsy:
- Small bowel and colonic mcuosa with increased eosinophils.

F Terminal Ileum, Biopsy:
- Small bowel mucosa with no specific pathologic abnormality.

G Colon, Right, Biopsy:
- Colonic mucosa with increased eosiophils.

H Colon, Transverse, Biopsy:
- Colonic mucosa with increased eosiophils.

I Colon, Left, Biopsy:
- Colonic mucosa with increased eosinophils (up to 60 eos/hpf).

J Rectum, Biopsy:

Surgical Pathology Report

- Rectal mucosa with increased eosinophils (up to 30 eos/hpf).

K Liver, Biopsy:
- Hepatocellular clearing without fibrosis, see comment.

Comment

Hepatocytes show clearing of the cytoplasm with apparent thickening of the cell membranes ("vegetable cells"). This change is widespread, involving > 80% of the hepatocytes. PAS stains the material within the hepatocytes, and PAS-D is negative. This is consistent with intrahepatic glycogen. These changes are suggestive but not diagnostic of glycogen storage disorder. Electron microscopy will be attempted and the results reported in an addendum.

There is no significant inflammation. There is general preservation of hepatic architecture, with no significant fibrosis seen on trichrome or reticulin stains.

All controls show appropriate reactivity.
Case discussed at interdepertmental conference on 7/24/2014.

Materials Received

A Duodenum, Biopsy
B Stomach, Biopsy
C Distal Esophagus, Biopsy
D Mid Esophagus, Biopsy
E Ileo-Cecal, Biopsy
F Terminal Ileum, Biopsy
G Right Colon, Biopsy
H Transverse Colon, Biopsy
I Left Colon, Biopsy
J Rectum
K Liver, Bx/Other

Gross Description

MWS

Specimen A is received in formalin, labeled with the patient's identification and "duodenum." It consists of seven tan-brown, irregular, vaguely papillary appearing soft tissue fragments measuring from 0.1 to 0.3 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
A-1, duodenum, 7 pieces.

Surgical Pathology Report

Specimen B is received in formalin, labeled with the patient's identification and "stomach." It consists of three tan-brown, irregular to round soft tissue fragments measuring from 0.3 to 0.4 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
B-1, stomach, 3 pieces.

Specimen C is received in formalin, labeled with the patient's identification and "distal esophagus." It consists of two white-gray, shaggy, irregular soft tissue fragments, both measuring 0.2 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
C-1, distal esophagus, 2 pieces.

Specimen D is received in formalin, labeled with the patient's identification and "mid esophagus." It consists of four white-gray, shaggy, irregular soft tissue fragments measuring from 0.1 to 0.2 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
D-1, mid esophagus, 4 pieces.

Specimen E is received in formalin, labeled with the patient's identification and "ileocecal valve." It consists of two tan-brown, irregular, vaguely papillary appearing soft tissue fragments measuring 0.3 and 0.5 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
E-1, ileo-cecal valve biopsy, 2 pieces.

Specimen F is received in formalin, labeled with the patient's identification and "terminal ileum." It consists of seven tan-brown, irregular, vaguely papillary appearing soft tissue fragments measuring from <0.1 to 0.4 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
F-1, terminal ileum, 7 pieces.

Specimen G is received in formalin, labeled with the patient's identification and "right colon." It consists of four pale tan, irregular soft tissue fragments measuring from 0.1 to 0.4 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Surgical Pathology Report

Summary of Sections:
G-1, right colon, 4 pieces.

Specimen H is received in formalin, labeled with the patient's identification and "transverse colon." It consists of three pale tan, irregular soft tissue fragments measuring from 0.1 to 0.5 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
H-1, transverse colon, 3 pieces.

Specimen I is received in formalin, labeled with the patient's identification and "left colon." It consists of three pale tan, irregular soft tissue fragments measuring from 0.1 to 0.4 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
I-1, left colon, 3 pieces.

Specimen J is received in formalin, labeled with the patient's identification and "rectum." It consists of four pale tan, irregular soft tissue fragments measuring from 0.1 to 0.3 cm in greatest dimension. The specimen is wrapped, and submitted entirely.

Summary of Sections:
J-1, rectum, 4 pieces.

Specimen K is received in formalin, labeled with the patient's identification and "liver biopsy." It consists of four tan-brown soft tissue cores measuring 0.2 to 1.8 cm in length x 0.1 cm in diameter. The specimen is wrapped, and submitted entirely.

Summary of Sections:
K-1, liver core biopsy, 4 pieces.

Lee, Ina Han/END(07/22/2014)

Previous History Report

Accession#:	**Verified Date/Time:**	**Pathologist:**
01- S-13-09510	08/05/2013 4:49:14 PM	Twaddell, William Sanderson MD

Final Diagnosis

A. DUODENUM, BIOPSY:
- DUODENAL MUCOSA WITH NO DIAGNOSTIC ABNORMALITIES RECOGNIZED.

B. STOMACH, BIOPSY:
- GASTRIC MUCOSA WITH MINIMAL REACTIVE CHANGES.
- NO EVIDENCE OF H. PYLORI.

C. ESOPHAGUS, DISTAL, BIOPSY:
- SQUAMOUS MUCOSA WITH NO DIAGNOSTIC ABNORMALITIES RECOGNIZED.

D. ESOPHAGUS, MID, BIOPSY:
- SQUAMOUS MUCOSA WITH NO DIAGNOSTIC ABNORMALITIES RECOGNIZED.

E. TERMINAL ILEUM, BIOPSY:
- SMALL BOWEL MUCOSA WITH PROMINENT LYMPHOID AGGREGATE, WITHIN NORMAL LIMITS.

F. COLON, RIGHT, BIOPSY:
- COLONIC MUCOSA WITH NO DIAGNOSTIC ABNORMALITIES RECOGNIZED.

G. COLON, TRANSVERSE, BIOPSY:
- COLONIC MUCOSA WITH NO DIAGNOSTIC ABNORMALITIES RECOGNIZED.

H. COLON, LEFT, BIOPSY:
- COLONIC MUCOSA WITH NO DIAGNOSTIC ABNORMALITIES RECOGNIZED.

I. RECTUM, BIOPSY:
- COLONIC MUCOSA WITH NO DIAGNOSTIC ABNORMALITIES RECOGNIZED.

Accession#:	**Verified Date/Time:**	**Pathologist:**
01- S-14-02607	03/06/2014 7:55:32 AM	Alexiev, Borislav A, MD

Final Diagnosis

A. GALLBLADDER, CHOLECYSTECTOMY:
- GALLBLADDER WITH CHRONIC CHOLECYSTITIS.
- ONE REACTIVE LYMPH NODE.

Accession#:	**Verified Date/Time:**	**Pathologist:**
01- S-14-09176	07/31/2014 12:12:18 PM	Twaddell, William Sanderson MD

Final Diagnosis

A Duodenum, Biopsy:
- Duodenal mucosa with no specific pathologic abnormality.

Previous History Report

Accession#:	**Verified Date/Time:**	**Pathologist:**
01- S-14-09176	07/31/2014 12:12:18 PM	Twaddell, William Sanderson MD

B Stomach, Biopsy:
- Gastric mucosa with mild reactive changes.

C Esophagus, Distal, Biopsy:
- Squamous mucosa with no specific pathologic abnormality.

D Esophagus, Mid, Biopsy:
- Squamous mucosa with no specific pathologic abnormality.

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